## Indiana State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>07272010</u>	Address:	Ash Rd. just sout of
Case #:	<u>24-31</u> 725		Bar Rd
County:	<u>Elkhart</u>		Elkhart, IN
Type of Laboratory Scizure (check one)  Operational Lab Chemical/Glassware/Equipment (only) Dumpsite (only)		Seizure Location ( Residence Outbuilding Vehicle	check all that apply)  If Jotel/Motel  Open – No Structure  Other:
Corrosi	nd: Location (bedroom, kitchen, open a nat apply)  I/Ammonia Reaction(s):  Osphorous/Iodine Reaction(s):  Ceactive Metal (Lithium):  Ous Ammonia:  Inhoric Acid Gas Generator(s):  Open  Ve Acid:  Lithium  Lithiu		
Child under age 18 discovered (check one)       Investigative Information         ☐ Yes (number present)       ☐ Retail/Merchant Tip         ☒ No       ☐ Retail/Merchant Tip         *If yes, fax report to Child Protective Services       ☒ Other:         This report is to be faxed to the following agencies that serve the location:         Fire Department: Concord Township       Fax: 574-875-7687         Health Department: Elkhart Co.       Fax: 574-875-3376         Child Protection Service:			
For further information regarding this methamphetamine laboratory, contact Investigating Officer: Maggie Shortt Phone 800-421-4912			

<sup>\*\*</sup> This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

<sup>\*\*\*</sup> This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.